

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY

REGION 5 77 WEST JACKSON BOULEVARD CHICAGO, IL 60604-3590

APR 06 1992

CERTIFIED MAIL RETURN RECEIPT REQUESTED

> Wolf's Auto Repair Attn: General Manager 202 N. Superior Albion, MI 49224

Her business HSM-5J

Mes hat started HSM-5J

was not 122/82.

Was mad 6/22/82.

Request for Information Pursuant to Section 104(e) of CERCLA for the Albion-Sheridan Township Landfill Site in Albion, Michigan, hereinafter referred to as "the Site".

Dear Sir or Madam:

The United States Environmental Protection Agency (U.S. EPA) is currently investigating the source, extent and nature of the release or threatened release of hazardous substances, pollutants or contaminants on or about the Albion-Sheridan Township Landfill in Albion, Michigan. This investigation requires inquiry into the generation, storage, treatment and disposal of such substances that have been or threaten to be released at the Site. U.S. EPA is also investigating the ability of persons connected with the Site to pay for or perform a clean-up of the Site.

Pursuant to the authority of Section 104(e) of the Comprehensive Environmental Response Compensation and Liability Act (CERCLA), 42 U.S.C. 9604(e), as amended by the Superfund Amendments and Reauthorization Act of 1986, Pub. L. 99-499, you are hereby requested to respond to the Information Requests enclosed. Compliance with the enclosed Information Requests is mandatory. Failure to respond fully and truthfully to each and every Information Request within thirty (30) days of receipt of this letter, or to adequately justify such failure to respond, can result in enforcement action by U.S. EPA pursuant to Section 104(e)(5) of CERCLA which, as amended, authorizes the United States to seek penalties from a Federal court of up to twenty-five thousand dollars (\$25,000) for each day of continued "Non-compliance" is considered by U.S. EPA to be non-compliance. not only failure to respond to the Requests but also failure to respond completely and truthfully to each Request. Please be further advised that provision of false, fictitious, or fraudulent statements or representations may subject you to criminal penalties of up to ten thousand dollars (\$10,000) or up to five (5) years of imprisonment or both under 18 U.S.C. 1001.



The United States Environmental Protection Agency has the authority to use the information requested herein in an administrative, civil or criminal action. This Information Request is not subject to the approval requirements of the Paperwork Reduction Act of 1980, 44 U.S.C. § 3501, et seq.

You may, if you desire, assert a business confidentiality claim covering part or all of the information requested, in the manner described by 40 C.F.R. 2.203(b). Information covered by such a claim will be disclosed by U.S. EPA only to the extent, and only by means of the procedures, provided in 40 C.F.R. Part 2, Subpart B. If no such claim accompanies the information when it is received by U.S. EPA, it may be made available to the public by U.S. EPA without further notice to you. You should read carefully the above-cited regulations, together with the standards set forth in Section 104(e)(7) of CERCLA, before asserting a business confidentiality claim, since certain categories of information are not properly the subject of such a claim, as stated in Section 104(e)(7)(ii) of CERCLA.

This Information Request is directed to your company, its officers, directors and employees and its subsidiaries, divisions, facilities, and their officers, directors and employees. The relevant time period for this Request is 1966 to 1981.

To ensure proper handling, your response to this Information Request should only be mailed to:

Paul J. Rogers Superfund Program Management Branch, HSM-5J U.S. Environmental Protection Agency 77 West Jackson Boulevard Chicago, Illinois 60604

If you have any questions concerning this request, please direct such questions to Paul J. Rogers at (312) 353-8069.

Thank you for your cooperation in this matter.

Sincerely,

Thomas Mateer, Acting Chief

Superfund Program Management Branch

Enclosure

INSTRUCTIONS

- 1. Read all questions and the affidavit before completing the form.
- 2. You must respond to all questions on the enclosed form.
- 3. For questions containing a YES/NO option, circle the appropriate response. Circle one response only.
- 4. If you require additional space for your response, attach additional sheets to this form. At the top of each sheet state your name and clearly indicate the number of the question to which you are responding.
- 5. Sign your name under oath at the end of the enclosed form.

DEFINITIONS

- 1. "The Site" shall mean and include the property on or about the Albion-Sheridan Township Landfill in Albion, Michigan. The Albion-Sheridan Township Landfill is located approximately one mile east of Albion, Michigan between Michigan Avenue (also known as U.S. Highway 99 or old U.S. Highway 12) and East Erie Road. The area is also defined as Lot 27 and Lot 28 of the Supervisor's Plat.
- 2. The term "business" means any corporation, partnership, sole proprietorship, group, association, joint-venture, affiliation, subsidiary, agency or unit of government.
- 3. The term "affiliated" means any manner of ownership interest, franchise arrangement or partnership association and/or relationship including but not limited to: subsidiary, franchise, cooperative, partnership, trust, etc.
- 4. The term "supporting documents" means any and all records or documents which provide information to support your response. These include, but are not limited to, receipts, manifests, shipping documents, canceled checks, accounts payable/receivable records, accounting ledgers, weight tickets, etc.

INFORMATION REQUESTS

1.	Full Legal Name of Business:			
2.	Address:			
3.	Telephone Number: (include area code)			
4	Has your business used any other names since 1966? YES NO If YES, state previous business Name and Address.			
5.	Dates of Operation (under each name).			
6.	Is your business owned by or affiliated with any other business? YES NO If yes, state name of affiliated business.			
7.	Has your business c since 1966? Was this a Stock sal Was this an asset sa Other (please specif State name and addre	YES e? YES le? YES y)	NO NO	ion anytime
8.	Respond to the follo during the period 19		r business	operations
	Did you change oil? Did you change antif	reeze and other	YES	NO
	motor vehicle fluids		YES	ИО
	Did you have hydraul	ic equipment?	YES	NO
	Did you use any solv		YES	NO
	Did you use any pain	ts?	YES	NO

9.	If your answer to any of the questions in number 8 above was YES, respond to the following:		
	Where did you dispose of the waste material from these operations (state time frames for each disposal location)?		
	Who transported the waste material to each disposal location? (Specify transporter name and address)		
10.	Have you, or any of your agents or employees, ever arranged to dispose of any waste at the Site or arranged to dispose of waste with any hauler who may have disposed of the material at		
	the Site? YES NO our response to number 10 was YES, answer numbers 11, 12, 13 14 below. If NO, skip to number 15.		
11.	State the date, or if unknown, approximate date, of each transaction to dispose of waste at the Site and/or with any waste hauler who may have disposed of the material at the Site.		
	(Submit copies of all supporting documents.)		
12.	What type of material did you arrange to dispose of at the Site? (Check each applicable substance)		
	Waste oil Antifreeze		

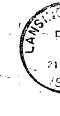
	(If exact figures are available please state amount and supp supporting documentation.)
•	Is the only material you arranged to dispose of at the Si oil you accepted for collection from private citizens with changed their own oil? (Do not circle YES if you also see material from vehicles your business serviced or if you mix other material with this "recycled oil.") YES NO
•	Do you know the names of any other businesses that arranged dispose of waste at the site or who arranged to dispose waste with a waste hauler who disposed of the waste at the site? If so, state the name, address and type of waste, known, for each business.
	ou need additional space for any of your responses use thousands.

AFFIDAVIT

I, the undersigned, being first duly sworn on my oath, depose and state that I have conducted a reasonably prudent search for facts, data and documents which included interviewing knowledgeable persons and examining relevant documents and that the above are true responses to the questions and information requests.

Your Signature	Print your name
Home address	Home Phone
City, State and Zip	Business Phone

WOLF'S ALBION SHELL' 100 E. Michigan Ave. **ALBION, MI 49224** 517-629-4910





AHn: Paw Rogers, 45m-55 Superfund Program Management Branch U.S. Environmental Protection agency 77 West Jackson Bouleward Chicago, Ill. 60604

ALBION-SHERIDAN TOWNSHIP LANDFILL, ALBION, MICHIGAN

Section 104(e) Information Request Letters dated April 6, 1992

P 864 089 408

Certified Mail Receipt No Insurance Coverage Provided Do not use for International Mail

Wolf's Auto Repair
Attn: General Manager 202 N. Superior Albion, MI 49224

Postage	\$.52
Certified Fee	1.00
Special Delivery Fee	
Restricted Delivery Fee	
Return Receipt Showing to Whom & Date Delivered	1.00
Return Receipt Showing to Whom, Date, & Address of Delivery	
TOTAL Postage & Fees	\$
Postmark or Date (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
	Certified Fee Special Delivery Fee Restricted Delivery Fee Return Receipt Showing to Whom & Date Delivered Return Receipt Showing to Whom, Date, & Address of Delivery TOTAL Postage & Fees

j	SENDER: • Complete items 1 and/or 2 for additional services. • Complete items 3, and 4a & b. • Print your name and address on the reverse of this form so th return this card to you. • Attach this form to the front of the mailpiece, or on the back does not permit. • Write "Return Receipt Requested" on the mailpiece below the art • The Return Receipt Fee will provide you the signature of the pers to and the date of delivery.	if space 1. Addressee's Address cicle number. 2. Restricted Delivery
complete	3. Article Addressed to: Wolf's Auto Repair Attn: General Manager 202 N. Superior Albion, MI 49224	4a. Article Number 4b. Service Type Registered Insured Certified COD Express Mail Return Receipt for Merchandise 7. Date of Delivery
8	5. Signature (Addressee) 6. Signature (Agent) PS Form 3811, November 1990 *U.S. GPO: 1991–28	Addressee's Address (Only if requested and fee is paid) 7-086 DOMESTIC RETURN RECEIPT

ALBION-SHERIDAN TOWNSHIP LANDFILL, ALBION, MICHIGAN ENFORCEMENT CONFIDENTIAL, FOIA EXEMPT PREPARED IN ANTICIPATION OF LITIGATION

GENERATOR

Current Name, Mailing Address, Telephone Number and Contact Person

Reference

104(e) Response

Wolf's Albion Shell 100 E. Michigan Avenue

Albion, MI 49224 (517) 629-4910 6 467

(Address on return envelope)

James R. Wolf

Wolf's Auto Repair 202 N. Superior Albion, MI 49224 (Address to which letter sent)

Corporate Issues

This business was not started until 6/22/82.

Arrangement for Disposal/Transporter N/A

Date or Time Period of Disposal N/A

Hazardous Substances Disposed of (RCRA Waste Codes if Established) N/A

Volume or Quantity N/A

Substance like those of the Generator that were found at the site None

Other information of interest None